FORM D

Name of Offering

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D **TEMPORARY**

Originally-Executed Version

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

(check if this is an amendment and name has changed, and indicate change.)

OMB NUMBER: 3235-0076 October 31, 2008 Expires: Estimated average burden hours per response 16.00

> SEC USE ONLY Prefix Serial **DATE RECEIVED**

TOB Capital, LP - Offering of Limited Partnership Interests	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506	□ Section 4(6) □ ULOF
Type of Filing: ⊠ New Filing: NJ, NY ⊠ Amendment: SEC	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
TOB Capital, LP	08063306
	elephone Nui
**- * --	2-783-1700
NY 10022	
	lephone Number (Including Area Code)
(if different from Executive Offices) Same as above.	areas above.
Brief Description of Business: Investments in securities.	
Type of Business Organization NOV 1-4-20	18 (please specify): Mali Processin
□ corporation □ limited partnership, already formed □ □ coffee	n (please specify):
business trust	Section Section
	NOV OF POOR
Actual or Estimated Date of Incorporation or Organization: 0 4	nal Estimated NOV 05 2006
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	State: DE
CN for Canada; FN for other foreign jurisdiction)	Washington Do
GENERAL INSTRUCTIONS Federal:	101
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation	n D or Section 4(6), 17 CFR 230.501 et seq.
Or 15 U.S.C. 77d(6).	•
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offer	
Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the	
address after the date on which it is due on the date it was mailed by United States registered or certified π	nail to that address.
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 205	10
Where to I lie. 0.5. Securities and Exchange Commission, 450 I had bucci, 14.44., Washington, 2.6. 205	
Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manual	ally signed. Any copies not manually signed
must be photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only rep	
changes thereto, the information requested in Part C, and any material changes from the information previous	ously supplied in Parts A and B. Part E need
not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for	
adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice wi	
where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the	claim for the exemption, a fee in the proper

amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is

ATTENTION

constitutes a part of this notice and must be completed.

predicated on the filing of a federal notice.

		A. BASIC IDI	ENTIFIC	CATION	I DATA		
2. Enter the information requested for the following:							
	the issuer, if the issuer					6 100/	
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
	ficer and director of co	rnorate issuers ar	nd of corr	norate ge	neral and mana	ging general pa	rtners of partnership
issuers; and	ice, and director of co	rporate issuers at	14 01 001	orate ge	·	.22 Barrarar ba	
· ·	nanaging partner of pa	artnership issuers.					
Check Box(es)that Apply	Promoter	☐ Beneficial C	Owner	□ Execu	tive Officer	☐ Director	⊠ General and/or Managing Partners
Full Name (Last name fir TOB Capital (GP), LLC		ier")		-			
Business or Residence Acco Citigroup Alternative					, New York, N	NY 10022	
Check Box(es)that Apply:	☐ Promoter ☑ Principal of the O	General Partner	□ Bene Owner	eficial	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name fir	st. if individual)						
Henick, Craig	,						
Business or Residence A	ddress (Number and	Street, City, State	e, Zip Co	de)			
c/o Citigroup Alternativ					, New York, P	NY 10022	
Check Box(es)that	☐ Promoter		□ Bene	eficial	☐ Executive	☐ Director	☐ General and/or
Apply:	☑ Principal of the Company	General Partner	Owner		Officer		Managing Partners
Full Name (Last name fir Sun, Edward	st, if individual)						
Business or Residence A	ddress (Number and	Street, City, State	e, Zip Co	de)			
c/o Citigroup Alternativ	e Investments LLC,	731 Lexington A	venue, 2	4 th Floor			M Compand on the
Check Box(es)that Apply		☐ Beneficial C	owner	⊔ Exect	tive Officer	☐ Director	☑ General and/or Managing Partners
Full Name (Last name fir Citigroup Alternative II		e "Investment M	anager"))			
Business or Residence Address (Number and Street, City, State, Zip Code) c/o Citigroup Alternative Investments LLC, 731 Lexington Avenue, 24 th Floor, New York, NY 10022							
Check Box(es)that Apply	: Promoter	☐ Beneficial C	Owner	□ Execu	tive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name fir	st, if individual)						
Business or Residence A	idress (Number and	Street, City, State	e, Zip Co	de)			
Check Box(es)that Apply	: Promoter	☐ Beneficial C	Owner	□ Execu	itive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name fir	st, if individual)						
Business or Residence A	idress (Number and	Street, City, State	e, Zip Co	de)			
Check Box(es)that Apply	: Promoter	☐ Beneficial C	Owner	□ Execu	tive Officer	☐ Director	☐ General and/or Managing Partners
Full Name (Last name fir	st, if individual)						
Business or Residence A	idress (Number and	Street, City, State	e, Zip Co	de)			
	(Lise blank sheet	or conv and use	additiona	Loopies	of this sheet as	necessary)	• • • • • • • • • • • • • • • • • • • •

				B. IN	FORMAT	ION ABO	UT OFFEI	RING				
1. Has the issuer sold, or does the issuer intend to send, to non-accredited investors in this offering?							Yes	No ⊠				
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?							<u>\$5,000,</u>	<u>000*</u>				
* Sub	ject to the r	eduction by	the Gener	al Partner.								
_		·									Yes	No
	_	-	t ownership									
comm If a pe list the	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person of such a broker or dealer, you may set forth the information for that broker or dealer only. NOT APPLICABLE											
Full Nam	e (Last nan	ne first, if i	ndividual)									
Ducinecs	or Deciden	ca Addrass	(Number	and Street	City Stat	e Zin Code	<u> </u>					
Business	or Kesideli	ce Address	(Number	and Street	i, City, Stat	e, zip cou	-)					
Name of	Associated	Broker or	Dealer									
			nas Solicite individual								🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[iL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[N1]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)									
Business	or Residen	ce Address	(Number	and Street	, City, Stat	e, Zip Code	e)					
Name of	Name of Associated Broker or Dealer											
States in Which Person Listed has Solicited or Intends to Solicit Purchasers												
			individual								🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[Wi]	[WY]	[PR]
Full Nam	e (Last nan	ne first, if i	ndividual)									
Business	or Residen	ce Address	(Number	and Street	, City, Stat	e, Zip Code	;)					
Name of	Associated	Broker or	Dealer									
States in Which Person Listed has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[NK]	[IA]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1. Enter the aggregate offing price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check		
this box \square and indicate in the columns below the amounts of the securities offered for exchange		
and already exchanged.	Aggregate Offering Amount	Amount Already Sold
Type of Security Debt	\$ <u>0</u>	\$ <u>0</u>
Equity	\$0	\$0
	Ψ <u>σ</u>	Ψ <u></u>
Convertible Securities (including warrants)	\$_0	\$_0
Limited Partnership Interests	\$ 2,000,000,000 ¹	\$ <u>421,087,079</u>
Other (Specify)	\$ 0	\$ 0
Total	\$ 2,000,000,000	\$ 421,087,079
	\$ <u>2,000,000,000</u>	\$ <u>421,087,079</u>
Answer also in Appendix, Column 3, if filing under ULOE		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".		Aggregate Dollar
	Number Investors	Amount of Purchases
Accredited Investors	8	\$ <u>421,087,079</u>
Non-accredited Investors	0	\$ <u>0</u>
Total (for filings under Rule 504 only)	N/A	\$ <u>N/A</u>
Answer also in Appendix, Column 4, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
Type of offering	Security	Sold
Rule 505	N/A	\$ <u>0</u>
Regulation A	N/A	\$ <u>0</u>
Rule 504	N/A	\$ 0
Total	N/A	\$ 0
		<u> </u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$ <u>0</u>
Printing and Engraving Costs		\$ <u>0</u>
Legal Fees	X	\$ 50,000
Accounting Fees		\$ 0
Engineering Fees		\$ 0
Sales Commissions (specify finder's fees separately)		\$ 0
Other Expenses (identify) Blue Sky Filing Fees		\$0
Total		\$ 50,000
ı Utal	<u> </u>	Φ <u>-20,000</u>

¹ This is a target offering amount. The actual offering amount may be larger or smaller.

Question I and the total expenses furnished in response to Part C - Question 4.a. this differ the "adjusted gross proceeds to the issuer"	ence		\$.	1,999,950,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to for each of the purposes shown. If the amount for any purpose is not known, furnish an eand check the box to the left of the estimate. The total of the payments listed must equal to adjusted gross proceeds to the issuer set froth in response to Part C - Question 4.b above.	stimat	te		
		Payments To Officers, Directors, & Affiliates	Б	Payments To Others
Salaries and fees				\$ <u>0</u>
Purchase of real estate				\$0
Purchase, rental or leasing and installation of machinery and equipment	_	\$ <u>0</u>		\$ <u>0</u> \$0
Construction or leasing of plant buildings and facilities		\$ <u>0</u> \$0		\$ <u>0</u>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	u	\$ <u>U</u>		\$ <u>U</u>
Repayment on indebtedness		\$ <u>0</u>		\$ <u>0</u>
Working capital		\$ <u>0</u>		\$ <u>0</u>
Other (specify): Investments in securities.		\$ 0	X	\$ <u>1,999,950,000</u>
Column Totals		\$ <u>0</u>	X	\$ <u>1,999,950,000</u>
Total Payments Listed (column totals added)		⊠ \$_	1,999,	950,000
D. FEDERAL SIGNATURE	·			
The issuer has duly caused this notice to be signed by the undersigned duly authorized pers following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities the information furnished by the issuer to any non-accredited investor pursuant to paragraph (by	Com	nission, upon wr		
Issuer (Print or Type) Signature		Date	C) \$2	
TOB Capital, LP		11/4/	JY	
Name of Signer (Print or Type)				
Edward Sun Principal				
ATTENTION				
Intentional misstatements or omissions of fact constitute federal crimi	nal v	riolations. (Se	e 18	U.S.C. 1001.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END